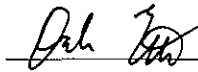


LCP-AR2

LABOR COMPLIANCE PROGRAM ANNUAL REPORT

Format for Awarding Body that enforces its own Labor Compliance Program for all projects (Labor Code §1771.5(a))

Report for the reporting period 06/01/2010 to 06/30/2010
(mm/dd/yyyy) (mm/dd/yyyy)

1. Name of Labor Compliance Program (LCP) : Victor Elementary School District		
2. LCP I.D. Number (assigned by DIR): 2003.00257	3. Date of Initial Approval: June 13, 2003	
4. Contact person (include name, title, address, telephone, fax, and e-mail, if available): Name: Vince Maciel Address: 15579 8 th Street, Victorville, CA 92395 Phone: (760) 245-1691 Fax: (760) 245-6245 Email: vmaciel@vesd.net		
5. Did LCP perform any LC § 1771.5 enforcement activities during the 12 months in the reporting period? Please check one: <input type="checkbox"/> Yes If Yes, proceed to item 6 on the next page <input checked="" type="checkbox"/> No If No, complete the information below, sign the form and submit to DIR, Office of the Director, Attn: LCP Special Assistant, 455 Golden Gate Avenue, 10th Floor, San Francisco CA 94102		
What suggestions do you have for the Department of Industrial Relations to better assist you with your program in the coming year? (attach additional sheets if necessary)		
SUBMITTED BY:		
 Signature	Dale Etter Director of Facilities Name and Title	10-29-10 Date